

**Abstract 663****TITLE:** A Comprehensive Strategy to Reduce and Prevent HIV Transmission**AUTHORS:** Buchenholz, G (Association to Benefit Children, NY, NY)

Crawford, C (Thomas Jefferson School of Law, San Diego, CA)

**ISSUE:** In late 1998, the Institute of Medicine ("IOM") recommended that Congress mandate universal prenatal testing. The recommendation did not include a universal counseling or treatment requirement. Experiences of perinatal, maternal and family health services in the most severely-affected U.S. areas for infant and neonatal HIV transmission suggest, however, that testing absent universal counseling and treatment may (1) fail to prevent matern-to-infant HIV transmission and (2) result in unacceptable delays in perinatal HIV treatment.

**SETTING:** All providers of perinatal health care services, including private and Medical facilities, birthing centers, and community health centers.

**PROJECT:** The Association to Benefit Children ("ABC") has been actively involved in the issue of newborn testing for HIV since 1989, both as advocacy organization and provider of direct services. ABC's dual experience suggests a better, integrated solution than the IOM recommendation to Congress. Before recent advances in newborn HIV prevention (e.g. AZT during pregnancy), ABC advocated and eventually filed suit to compel officials in N.Y. State with the highest incidence of maternal and infant HIV, to disclose blinded newborn HIV results to parents, but only if medical professionals were also required to counsel and treat. This comprehensive, three-step strategy, including a mother's right to refuse testing after counseling, aimed to insure prompt treatment of all infected infants, as well as children in foster care. Absent counseling and treatment provisions, ABC feared, already marginalized, at-risk infants and their families might not obtain needed care. In the long term, ABC believed that, absent counseling and treatment, lives would be lost and essential prevention education would not occur. ABC pushed its approach amidst proposals for universal testing requirements (without counseling or treatment) comparable to those recently announced by the IOM.

**RESULTS:** ABC's successful lawsuit against N.Y. State, advocating universal perinatal counseling, testing and treatment largely contributed, in February 1997, to the enactment of legislation formalizing such a comprehensive, three-step prevention strategy. The legislation has normalized testing and counseling as a part of routine infant and maternal health care in N.Y. Standard of care counseling, testing and treatment-- in that order -- now enables prompt detection and treatment of infant HIV infection, along with maternal counseling to prevent future infection.

**LESSONS LEARNED:** N.Y.'s experience confirms that universal testing must be accompanied by counseling and treatment from medical professionals. Otherwise, marginalized, at-risk populations will not be assured perinatal counseling and treatment and may not seek perinatal testing. The N.Y. model indicates that, nationally, counseling and treatment must be a part of an integrated HIV family prevention strategy. Maternal right to refuse testing, in order to balance prevention and civil rights concerns should accompany these requirements.

**PRESENTER CONTACT INFORMATION****Name:** Colin Crawford**Address:** Thomas Jefferson School of Law, 2121 San Diego Ave.  
San Diego, CA 92110**Telephone:** (619) 297-9700 x1520**Fax:** (619) 296-4284**E-mail:** colinc@tjssl.edu